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47973 7590 12/10/2007				ve its own certificate of	of mailing or transmission.		
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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	R	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
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TITLE OF INVENTION	EREPLICATION PROT	OCOL FOR DATA STO	DRES				
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1440	\$300	\$0 ~~ \$	\$1740	03/10/2008	
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☐ "Fee Address" ind PTO/SB/47; Rev 03-0 Number is required.	ondence address (or Cha B/122) attached. ication (or "Fee Address 20 or more recent) attach	Indication form	(2) the name of a sing registered attorney or 2 registered patent att listed, no name will be	1) the names of up to 3 registered patent attorneys r agents OR, alternatively, 2) the name of a single firm (having as a member a egistered attorneys or agent) and the names of up to registered patent attorneys or agents. If no name is steed, no name will be printed.			
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Microsoft C		Redmond, \	edmond, Washington				
Please check the appropriate assignee category or categories (will not be printed on the patent):							
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